| | UNITED STATES EPARTMENT OF THE I UREAU OF LAND MANA | NTERIOR | ia Expi | RM APPROVED 3 NO. 1004-0135 res: July 31, 2010 | |
|---|---|---|---|---|--|
| SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals. | | | 5. Lease Serial No | 5. Lease Serial No. NMNM0554771 6. If Indian, Allottee or Tribe Name | |
| Do not use th abandoned we | 6. If Indian, Allott | | | | |
| SUBMIT IN TRI | PLICATE - Other instruc | ctions on reverse side. | 7. If Unit or CA/A | greement, Name and/or No. | |
| Type of Well Gas Well Oth | | 8. Well Name and No. GLOCK 16 B2AD FEDERAL 1H | | | |
| 2. Name of Operator MEWBOURNE OIL COMPANY E-Mail: jfathan@mewbourne.com | | | 9. API Well No. 30-015-4299 | 9. API Well No. 30-015-42991-00-X1 | |
| a. Address P O BOX 5270 HOBBS, NM 88241 | | 3b. Phone No. (include area co Ph: 575-393-5905 | de) 10, Field and Pool. GETTY | or Exploratory | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) | | | 11. County or Pari | 11. County or Parish, and State | |
| Sec 16 T20S R29E NENE 900 32.578154 N Lat, 104.071118 | EDDY COUN | EDDY COUNTY, NM | | | |
| 12. CHECK APPI | ROPRIATE BOX(ES) TO | D INDICATE NATURE O | F NOTICE, REPORT, OR OTH | IER DATA | |
| TYPE OF SUBMISSION | · · · | ТҮРЕ | TYPE OF ACTION | | |
| | | Deepen | Production (Start/Resume) | U Water Shut-Off | |
| □ Notice of Intent | □ Alter Casing | Fracture Treat | Reclamation | Well Integrity | |
| Subsequent Report | Casing Repair | New Construction | C Recomplete | 🛛 Other | |
| Final Abandonment Notice | Change Plans | Plug and Abandon | Temporarily Abandon | Drilling Operation | |
| | Convert to Injection | Plug Back | Water Disposal | | |
| determined that the site is ready for fi 04/04/15 TD 17 1/2" hole @ 1 sks EconoCem-HLC w/additiv @ 14.8#/g w/1.36 yd. Plug do 1250# for 30 mins, held OK. C | 465'. Ran 1465' of 13 3/8' es. Mixed @ 12.5 #/g w/2 wn @ 10:30 P.M. 04/04/1 | .13 yd. Tail w/200 sks Clas 5. At 7:45 P.M. 04/05/15. te | is C w/2% CaCl2. Mixed ested csg & BOPE ISM OIL C | ONSERVATION | |
| | V | | ARTE | SIA DISTRICT | |
| Bond on file: NM1693 nationw | ide & NMB000919 | - | יכס | 30 20.0 | |
| | | Accepted for recor | rd Rf | | |
| | | UD 11/4/15 | | | |
| I hereby certify that the foregoing is | Electronic Submission #2 For MEWBOUR | 297851 verified by the BLM V RNE OIL COMPANY, sent to sing by JENNIFER SANCHE | | | |
| Name (Printed/Typed) JACKIE LA | | | IOR 200 BEPRESENTATIVE | | |
| Signature (Electronic S | | | 12015 0CT 2-2 201 | 5 //AA// | |
| | THIS SPACE FO | R FEDERAL OR STAT | E OFFICE USE MANI | | |
| spproved By | | Title | BUREAU OF LAND MANAG | EMENT ICE Dae | |
| ditions of approval, if any, are attached ify that the applicant holds legal or equ ch would entitle the applicant to condu | itable title to those rights in the | not warrant or subject lease Office | | | |
| e 18 U.S.C. Section 1001 and Title 43 (tates any false, fictitious or fraudulent s | J.S.C. Section 1212, make it a c tatements or representations as | crime for any person knowingly a to any matter within its jurisdiction | nd willfully to make to any department | or agency of the United | |
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| ** BI M REVI | SED ** BLM REVISED | • ** BLM REVISED ** BI | M REVISED ** BI M REVIS | FD ** | |

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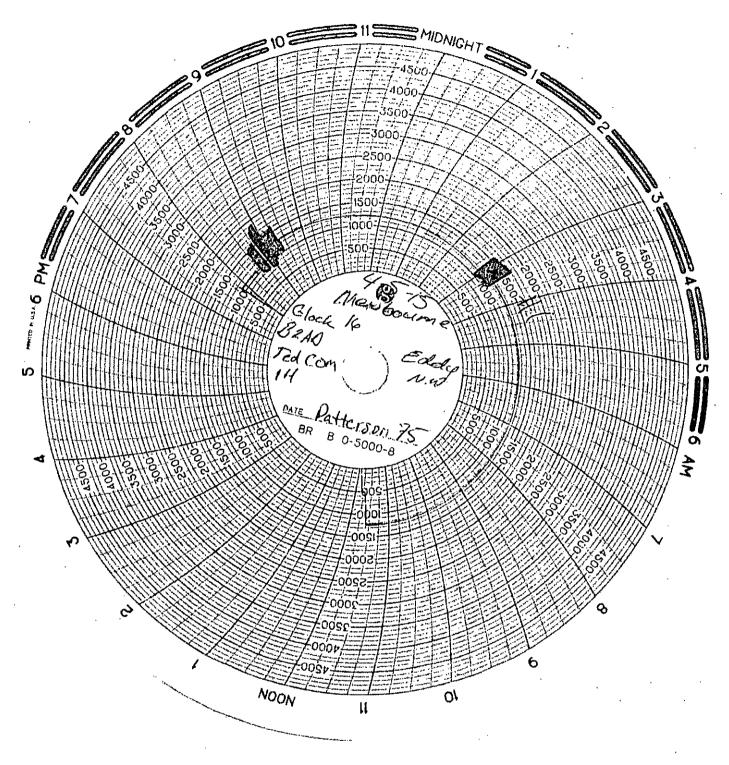
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WELDING + BOP TESTING NIPPLE UP SERVICE - BOP LIFTS - TANDEM MUD AND GAS SEPARATORS ·Pg. of **I**R Lovington, NM . 575-398-4540 64177 Mew JOUINE Company : Date: B2ND Patterso M OC. 6 12 Drilling Contractor: -Lease: 9000 Plug Size &Type: _ _ Drill Pipe Size Tester Required BOP: ____ Installed BOP: "Appropriate Casing Valve Must Be Open During BOP Test * Check Valve Must Be Open/Disabled To Test Kill Line Valves Dart -1-1 Valve #19 #2 00000 Stand Pipe ٦ Valve Kelly/ #24 Annular #15 Тор #6 #5 . . Ē Drive £ 111 #22 #23 TIW IBOP Pipe Rams #12 ÷17 Vəlve A18 #17 Blind Rams #13 ł, 489 ¢@C างเปล่าเบลไ ud Gaugģ 1807 ump Valve "Pump Valve 116 #20 ¢Ş, #11,#10 #9 #8 #7 #25 Super Choke · Pipe Rams #14 ٤. u=122 Casing TEST . TEMS TESTED TEST LENGTH LOW PSI HIGH PSI REMARKS 4. Casing \mathcal{O} 50 Test lass ,t, . . $\overline{\partial}$ 2 1.0 1. / · · · · . . • F ٠. : 1 1.5 ĩ .4 ۰, đ J. . ÷ ٠. ٠., 147 -----. • 3.4 cat÷ ,' ; ¹ Ŀ • `.• . ø 1 1 . 4 <u>;</u>]:;; 4 ٤, . 5. ۱.-È, e^r . "× 1 4 1. د ا



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